

ORDER FOR SUPPLIES OR SERVICES

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1. CONTRACT/PURCH. ORDER/ AGREEMENT NO. DAKF11-99-D-0005-		2. DELIVERY ORDER/ CALL NO. 0042		3. DATE OF ORDER/CALL 2000Sep22		4. REQ./ PURCH. REQUEST NO. W81E68-0229-F019		5. PRIORITY	
6. ISSUED BY ARMY ATLANTA CONTRACTING CENTER INSTALLATION, LOGISTICS, & ENVIRONMENTAL CONTRACTS 1309 ANDERSON WAY SW FORT MCPHERSON, GA 30330-1096				7. ADMINISTERED BY (if other than 6) SEE ITEM 6		8. DELIVERY FOB <input checked="" type="checkbox"/> DEST <input type="checkbox"/> OTHER (See Schedule if other)			
9. CONTRACTOR STANLEY ASSOCIATES INC RALPH I. SEBACHER 300 N WASHINGTON STREET SUITE 400 ALEXANDRIA VA 22314-2121				10. DELIVER TO FOB POINT BY (Date) SEE SCHEDULE		11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED			
12. DISCOUNT TERMS				13. MAIL INVOICES TO THE ADDRESS IN BLOCK See schedule					
14. SHIP TO USARC US ARMY RESERVE COMMAND ATTN: MSG ANGEL R. OLIVO 1401 DESHLER AVENUE SW FORT MCPHERSON, GA 30330-2000				15. PAYMENT WILL BE MADE BY DFAS DEFENSE FINANCE AND ACCOUNTING SERVICE DNO INDIANAPOLIS DEPARTMENT 3805 8899 EAST 56TH STREET INDIANAPOLIS, IN 46249				MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2.	
16. TYPE OF ORDER		DELIVERY/ CALL <input checked="" type="checkbox"/> PURCHASE		This delivery order/call is issued on another Govt. agency or in accordance with and subject to terms and conditions of above numbered contract. Reference your quote dated _____ Furnish the following on terms specified herein.					
ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.									
NAME OF CONTRACTOR				SIGNATURE		TYPED NAME AND TITLE		DATE SIGNED (YYYYMMDD)	
<input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:									
17. ACCOUNTING AND APPROPRIATION DATA/ LOCAL USE See Schedule									
18. ITEM NO.		19. SCHEDULE OF SUPPLIES/ SERVICES			20. QUANTITY ORDERED/ ACCEPTED*		21. UNIT	22. UNIT PRICE	23. AMOUNT
		SEE SCHEDULE							
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle				24. UNITED STATES OF AMERICA <i>Katherine E. Williams</i> BY: Katherine E. Williams CONTRACTING / ORDERING OFFICER				25. TOTAL \$158,525.92	
26. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED DATE _____ SIGNATURE OF AUTHORIZED GOVT. REP. _____				27. SHIP NO. <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		28. DO VOUCHER NO.		29. DIFFERENCES	
36. I certify this account is correct and proper for payment. DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____				31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		32. PAID BY		30. INITIALS	
								33. AMOUNT VERIFIED CORRECT FOR	
								34. CHECK NUMBER	
								35. BILL OF LADING NO.	
37. RECEIVED AT		38. RECEIVED BY		39. DATE RECEIVED (YYYYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NO.	
								42. S/R VOUCHER NO.	